

Work Order ID 87339

July-13-12 1:28:51 PM

~~U/R~~

\*87339\*

Page 1

Item ID: D350-748-101

Revision ID: ~~U/R~~

Item Name: Crosstube Installation, High Fwd

Start Date: 7/10/12 Start Qty: 1.00

Required Date: 9/28/12 Req'd Qty: 1.00

Reference:

Approvals: Process Plan: MLJDate: 12/07/16 Tooling:

QC:

Date:

SPC (Y/N):

Date:

Date:

\*N900040100\*

Setup Start \*NS1\*

Stop \*NS2\*

Cust Item ID:

Customer:

Run Start \*NR1\*

Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr

Revision Nbr

D350-748-141

F U R

100

\*100\*

DC

Document Control

DOCUMENT CONTROL

Memo

Photocopy bluefile &amp; type labels per PPPD350-748-101

0.00

0.00

DAS  
15  
2-89

CHG002

1 JGR MLJ 12-11-6

110

\*110\*

CNC Bend 1

CNC Delta 100 Bender

BENDING MACHINE - CROSSTUBES

Memo

Bend tube as per Dwg D350-748-141 using CNC bender program D350F and Folio FT

\*\*\*\*UNDER BEND .225" PER SIDE\*\*\*\*

0.00

0.00

JP

12-10-1

120

\*120\*

QC

Quality Control

QC15- Crosstube Dimensional Check

Memo

0.00

0.00

DAS  
11  
2-89

12-10-01

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
<b>FAULT CATEGORY</b>											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other		

# Work Order ID 87339

\*87339\*

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Item ID: D350-748-101

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID: U/R

Stop \*NS2\*

Item Name: Crosstube Installation, High Fwd

Start Date: 7/10/12 Start Qty: 1.00 \*1\*

Cust Item ID:

Required Date: 9/28/12 Req'd Qty: 1.00 \*1\*

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start \*NR1\*

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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125  
\*125\*

HandFXtube

Hand Finishing Crosstubes

Memo

\*\*\*Stress relief\*\*\*

Heat treat crosstube as per QSI010 4.3

Temp: \_\_\_\_\_

Start time: \_\_\_\_\_

Finish time: \_\_\_\_\_

0.00

0.00

210:18026  
mitch

CL 12/10/020

12/1/3

127

QC6- Inspect dimensions to drawing

0.00

\*127\*

QC

Quality Control

Memo

0.00

DAS 16  
17/10/09

Pto →

XPTO

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: Ante Date: 12/11/10QA Closed: CK Date:

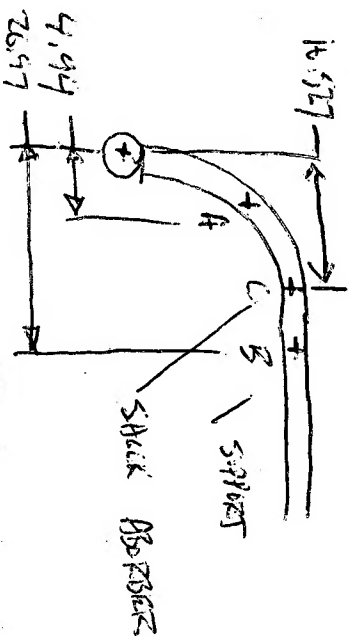
Work Order: <u>87339</u> Part No. <u>D350-748-101</u> NCR No. <u>12-2018</u>				<b>DISPOSITION</b> Rework <input checked="" type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b> <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input checked="" type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data	12/14/4	110	1	Tube crushing is over tolerance.	DAS 12 9-83 12/10/4	Acceptable, CRUSHING ACCEPTABLE per attached S.R.	DAS 12 9-83 12/10/4	JW 12-10-10	photo?
Equip/Tooling				Twist is over tolerance.					
Operator				Height is over tolerance.	DAS 12 9-83 12/10/4	Trim to 23.50 high.	JW 12-10-10	KC 12-10-10	
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY			
<b>Landing Gear</b> <input checked="" type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input checked="" type="checkbox"/> Crushed/Crimped. <input checked="" type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input checked="" type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

CRUSHING OF D350-748-101

12.04.19



Point A  $OD_1 = 2.400$   $OD_2 = 2.044$   
 $CRUSHING = (2.400 - 2.044) / (2.400 + 2.044) = 8\%$

Point B  $OD = 2.339$   $ID = 2.000$   
 ~~$CRUSHING$~~   $I = 0.684 \text{ in}^4$

Point C  $F = M_c / I = P \times 4.94 \times 2.044 / 2 = 0.361 = 13.98 \text{ P}$   
 $B_0 = F \times 26.47 \times 2.339 / 2 = 0.684 = 46.11 \times P$

$M.S. = 46.11 / 13.98 - 1 = 2.30$

So Tube will fail at support before tube fails at  
 case of max crushing. So 8% crushing is  
 acceptable.

Point C  $I = 0.684 \text{ in}^4$   
 ~~$F = M_c / I \Rightarrow P \times 16.527 \times 2.339 / 2 \times 0.684 = 28.26 \text{ P}$~~

$M.S. = 28.26 / 13.98 - 1 = 1.02$

So Tube will fail at shock absorber before case  
 of max crushing. So 8% crushing is acceptable.  
 12.04.19



**Work Order ID 87339****\*87339\***

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Item ID: D350-748-101

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID: U/R

Stop **\*NS2\***

Item Name: Crosstube Installation, High Fwd

Start Date: 7/10/12 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 9/28/12 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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130

0.00

**\*130\***

Crosstubes

0.00

Crosstubes

Memo

Crosstubes

1-Drill Tube as per Dwg D350-748-141 Using DT8876 A,B & C Drill Jigs,  
Set-up drill table as per QSI 010

2-Deburr

3-Engrave Part # and Batch # as per Dwg D350-748-141

4-Remove all marks from tube within limits of D350-748-141

5- Apply a light coat of LPS3 on the interior of tube

Batch: \_\_\_\_\_

140

QC5- Inspect part completeness to step on W/O

0.00

**\*140\***

QC

Memo

0.00

Quality Control

CHECK 10 DEG HOLES WITH DT8876E (EUROCOPTER CLAMP)

DAS  
16  
2-8

17/10/11

12-10-10

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>						
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
<b>FAULT CATEGORY</b>												
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	



# Work Order ID 87339

\*87339\*

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Item ID: D350-748-101 Accept \*N900040100\* Setup Start \*NS1\*  
 Revision ID: U/R Stop \*NS2\*  
 Item Name: Crosstube Installation, High Fwd  
 Start Date: 7/10/12 Start Qty: 1.00 \*1\* Cust Item ID:  
 Required Date: 9/28/12 Req'd Qty: 1.00 \*1\* Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start \*NR1\*  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
150	Outsource process-Cadplate per QSI017 4.1.9.1	0.00							
*150*									
Outsource3	Memo	0.00							
Outsource process - Cad plate	Issue P/O: 18101 Stress relief at 375° for 5 hours Magnetic Particle Inspect per ASTM E1444 Cadium Plate per AMS-QQ-P-416B, Class 1, Type 2 Embrittle relief at 375° for 8 hours, Chromate Treat Possible Supplier: Southwest United Industries Ensure Certificate of Conformity is attached								CL 12/10/11 (1)
160	Receive & Inspect for Damage & Mat'l Certs	0.00							
*160*									
Packaging	Memo	0.00							
Packaging	Ensure certificate of conformity is attached								NOTARY SER 176 ★SER WID CHG ATTACHED
170	QC5- Inspect part completeness to step on W/O	0.00							
*170*									
QC	Memo	0.00							B 12.7.15
Quality Control									R 12-10-01

SER 174 ISSUE PO 18302 LPI as per ASTM 1417 Level 2

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: <u>87339</u> Part No. <u>D350-748-101</u> NCR No. _____				<b>DISPOSITION</b> Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input checked="" type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b> <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data <input type="checkbox"/>	12/7/16	1A2	1	LOAD TEST TUBE TO TENSILE FOR 1 MINUTE	CP 12/7/15	Done	68-8 11 DAS		68-8 11 DAS	
Equip/Tooling <input type="checkbox"/>										
Operator <input type="checkbox"/>										
Material <input type="checkbox"/>										
Setup <input type="checkbox"/>										
Other <input type="checkbox"/>	12/7/16	1A4	1	NOT TUBE	CP 12/7/15	See page 4				
Process <input type="checkbox"/>										
Supplier <input type="checkbox"/>										
Training <input type="checkbox"/>										
Unapproved <input type="checkbox"/>										

FAULT CATEGORY			
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other



NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		
<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

# Work Order ID 87339

\*87339\*

Page 6

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Item ID: D350-748-101

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID: U/R

Stop \*NS2\*

Item Name: Crosstube Installation, High Fwd

Start Date: 7/10/12 Start Qty: 1.00 \*1\*

Cust Item ID:

Required Date: 9/28/12 Req'd Qty: 1.00 \*1\*

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start \*NR1\*

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description:	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
210	QC5- Inspect part completeness to step on W/O	0.00							
*210*									
QC	Memo	0.00							
Quality Control									
220	Pick Kit	0.00							
*220*									
Packaging	Memo	0.00							
Packaging									
230	QC4- 100% Inspect kits for completeness	0.00							
*230*									
QC	Memo	0.00							
Quality Control									

DAS  
11  
2-89

12.11.5

K

JP  
12.11.6.

DAS  
15  
2-89

12.11.06

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%; border: none;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		
<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

# Work Order ID 87339

**\*87339\***

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Item ID: D350-748-101

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

Revision ID: U/R

Stop

**\*NS2\***

Item Name: Crosstube Installation, High Fwd

Start Date: 7/10/12

Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 9/28/12

Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

QC:

Date:

SPC (Y/N):

Date:

Run Start

**\*NR1\***

Stop

**\*NR2\***

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

240

0.00

**\*240\***

Packaging

Packaging

Memo

0.00

Packaging

Identify and pack for shipping as per PPP D350-748-101

Location: \_\_\_\_\_

PPP Rev: \_\_\_\_\_

250

QC21- Final Inspection - Work Order Release

0.00

**\*250\***

QC

Memo

0.00

Quality Control

*5/8 12/14/07*

*12/11/08*

*MC 5 12-11-07*



NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
<b>FAULT CATEGORY</b>											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

# Picklist Print

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Page 1

Work Order ID: 87339

Parent Item: D350-748-101

Parent Item Name: Crosstube Installation, High Fwd

Start Date: 7/10/12

Required Date: 9/28/12

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev:A New Issue 06-07-05 JLM  
 IPP Rev:B Update qty of MS21042L5 06-09-12 KJ VERIFY BY:DD  
 IPP Rev:C Rev B 07-11-i5 DD  
 IPP Rev D Combined manufacturing 08.04.02 EC verified by: DD  
 IPP Rev:E 08-06-24 revD as per dwg DD verified by:EC IPP Rev:F 10.08.04 added QSI010  
 4.3 DD verf:EC  
 IPP REV:G ADD UNDER BEND COMMENT 12-05-28 JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
ALS4-1032-225 Insert		Purchased	No			200	Each	2,462.0000	1	1	AP	12-11-4	
				<u>Location</u>		<u>Loc Qty</u>							
				FP-B		2019							
				122290		2019							
				ST281		420							
				108696		146							
				110768		62							
				118386		55							
				118966		68							
				121269		89							
				ST282		23							
				120410		10							
				120451		13							
AN4-41A Bolt		Purchased	No			220	Each	411.0000	8	8	SP 12-11-6		
				<u>Location</u>		<u>Loc Qty</u>							
				360		181							
				121185		181							
				ST360		230							
				115108		3							
				115705		1							
				118838		8							
				119328		68							
				120423		150							

AN4-41A

Bolt

JMB

SP 12-11-6  
 m123346 3x

5151.

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>						
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
<b>FAULT CATEGORY</b>												
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

# Picklist Print

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Page 2

Work Order ID: 87339

Parent Item: D350-748-101

Parent Item Name: Crosstube Installation, High Fwd

Start Date: 7/10/12

Required Date: 9/28/12

Start Qty: 1.00

Required Qty: 1.00

**AN4-6A**  
Bolt Purchased No

220 Each 1,363.0000

16

16

SP

SP

Location Loc Qty Loc Code

ST356 1363  
119017 363  
121243 500  
122151 500

16x

**AN5-32A**  
Bolt Purchased No

220 Each 277.0000

4

M<sup>4</sup> 1229938

SP

SP

Location Loc Qty Loc Code

ST339 177  
119862 2  
120423 75  
122151 100  
ST340 100  
121541 100

**AN960JD10**  
Washer NAS1149D0363J Purchased No

200 Each 0.0000

1

1

AB 12-11-4

**AN960JD416**  
Washer NAS1149D0463J Purchased No

220 Each 29.0000

32

M<sup>32</sup> 123248 SP

SP

SP

Location Loc Qty Loc Code

ST351 29  
116289 8  
119097 21

**AN960JD516**  
Washer NAS1149D0563J Purchased No

220 Each 12.0000

8

M<sup>8</sup> 123355 SP

SP

SP

Location Loc Qty Loc Code

ST338 12  
2612 12

SP 12-11-6

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Shop Packet Print

Page 2

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions  <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other _____ _____ _____ _____
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# Picklist Print

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Page 3

Work Order ID: 87339

Parent Item: D350-748-101

Parent Item Name: Crosstube Installation, High Fwd

Start Date: 7/10/12

Required Date: 9/28/12

Start Qty: 1.00

Required Qty: 1.00

D2856-400  
Abrasion Strip

Manufactured No

200 f 143.0425

1181 1.2431579 *12-11-4*

Location	Loc Qty	Loc Code
ST403	133.598	
81875	133.598	
ST409	9.4445	
63735	0.6696	
68076	0.3149	
71164	8.46	

D3500-1  
Saddle

Manufactured No

220 Each 51.0000

Location	Loc Qty	Loc Code
ST423	40	
85421	40	
ST425	11	
76940	11	

D3501-1  
Bushing

Manufactured No

220 Each 232.0000

Location	Loc Qty	Loc Code
ST051	232	
67757	4	
73391	6	
74866	206	
85414	16	

D3502-1  
Support

Manufactured No

200 Each 47.0000

Location	Loc Qty	Loc Code
LG050	37	
77041	37	
ST051	10	
73419	9	
74873	1	

July-13-12 1:28:51 PM

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Page 3

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>						
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
<b>FAULT CATEGORY</b>												
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

# Picklist Print

July-13-12 1:28:51 PM

Page 4

Work Order ID: 87339

Parent Item: D350-748-101

Parent Item Name: Crosstube Installation, High Fwd

Start Date: 7/10/12

Required Date: 9/28/12

Start Qty: 1.00

Required Qty: 1.00

~~D350-748-141TRN~~  
Crosstube Turning Detail

Manufactured No

110 Each 2.0000

12-10-1  
①

Location

Loc Qty

Loc Code

LG 86271  
83277  
83278

2  
1  
1

MS2104214

Nut

Purchased No

220 Each 2,085.0000

24 24 m23021 SP SP

Location

Loc Qty

Loc Code

ST300  
119075  
121011  
121444

2085  
116  
193  
1776

MS2104215

Nut

Purchased No

220 Each 1,066.0000

m422452 SP SP

Location

Loc Qty

Loc Code

300  
121652  
ST300  
108827  
116105  
116548  
119109  
17651  
2937

500  
500  
566  
4  
5  
43  
502  
4  
8

MS21920-20

Clamp (per MIL-DTL-8783C)

Purchased No

200 Each 127.0000

2 2 AR 12-11-4

Location

Loc Qty

Loc Code

122518  
LG050  
116799  
120676  
121067  
121274  
122254

127  
8  
8  
2  
34  
75

July-13-12 1:28:51 PM

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Page 4



NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>						
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
<b>FAULT CATEGORY</b>												
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

# Picklist Print

Page 5

July-13-12 1:28:51 PM

Work Order ID: 87339

Parent Item: D350-748-101

Parent Item Name: Crosstube Installation, High Fwd

MS27039-1-10

Purchased

No

Screw

Start Date: 7/10/12

Required Date: 9/28/12

Start Qty: 1.00

Required Qty: 1.00

200

Each

141.0000

1

1

12.11.4

For Andy

Location

Loc Qty

Loc Code

GA

100

120449

100

ST291

5

120120

5

ST308

36

122027

36

July-13-12 1:28:51 PM

Shop Packet Print

Page 5

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

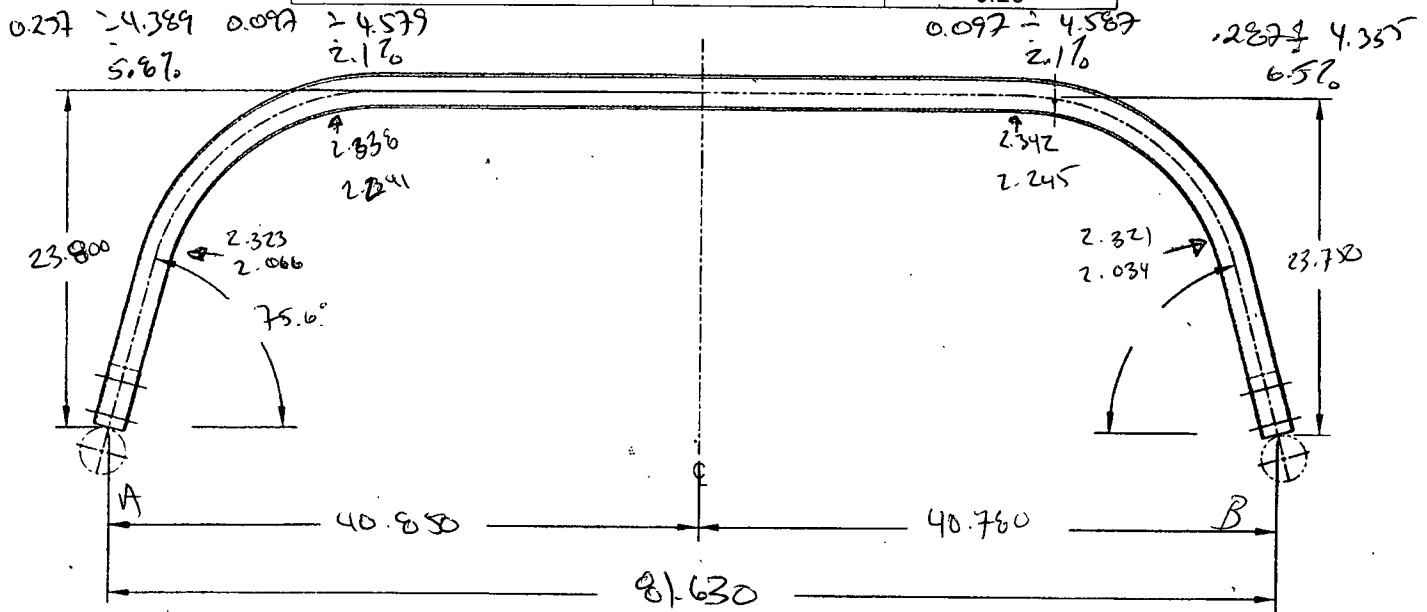
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions  <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
---	---	--

<b>DART AEROSPACE LTD</b>		<b>Work Order:</b>	<b>87339</b>
<b>Description:</b> Crosstube High Fwd (AS350/355)		<b>Part Number:</b>	<b>D350-748-101</b>
<b>Inspection Dwg:</b> D350-748-141 <b>Rev:</b> F		<b>Page 1 of 1</b>	

Required Dimension	Min	Max
Height	23.12	23.38
1/2 Span	40.77	41.03
Angle	75	77
Total Span	81.55	82.05
Bending Passes	7	--
Crushing	--	6%
Twist	--	0.25



	Side A	Side B
Bending Passes		
Crushing		
Comments		
Twist = 0.373"		
TRM TO 23.55" high. 6/12/10/4		

Side A crushing  
top of Bend = 2.17  
bottom of Bend = 5.87

Side B crushing  
top of Bend = 2.17  
bottom of Bend = 6.57

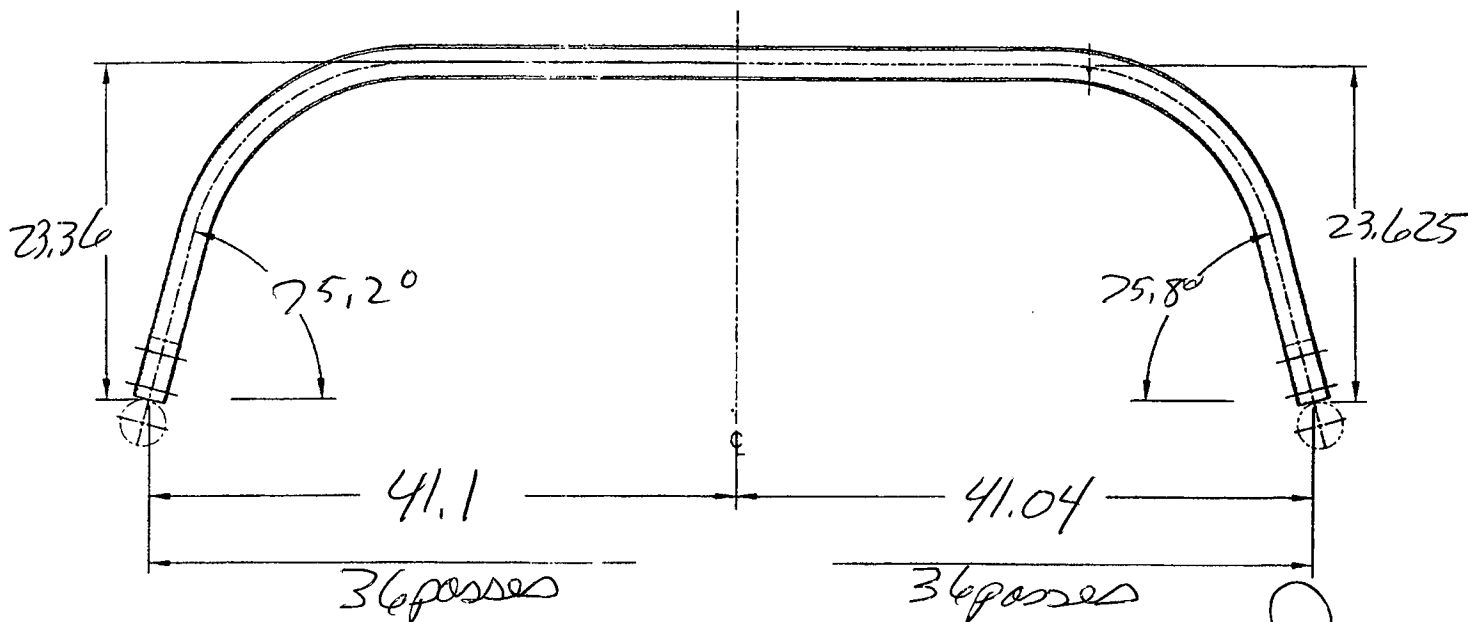
QC15 Inspection	16
Date	17/10/09

Rev	Date	Change	Revised by	Approved
A	07.02.06	New Issue	KJ/JM	
B	10.08.23	Dwg Rev updated	KJ	
C	11.11.07	Dwg Rev updated	KJ	
D	12.04.16	Added bending, crushing & twist dimensions	KJ	

*Measured Before De-Stress*

DART AEROSPACE LTD	Work Order:	87339
Description: Crosstube High Fwd (AS350/355)	Part Number:	D350-748-101
Inspection Dwg: D350-748-141 Rev: F		Page 1 of 1

Required Dimension	Min	Max
Height	23.12	23.38
1/2 Span	40.77	41.03
Angle	75	77
Total Span	81.55	82.05
Bending Passes	7	--
Crushing	--	6%
Twist	--	0.25



	Side A	Side B
Bending Passes		
Crushing		
Comments		
TWIST - 0.366" RM 12-10-1		

*12-10-1*

QC15 Inspection	
Date	

Rev	Date	Change	Revised by	Approved
A	07.02.06	New Issue	KJ/JM	
B	10.08.23	Dwg Rev updated	KJ	
C	11.11.07	Dwg Rev updated	KJ	
D	12.04.16	Added bending, crushing & twist dimensions	KJ	<i>[Signature]</i>

Item	Qty -141	Part Number	Description
1	X	D350-748-141	CROSSTUBE ASSEMBLY (AS 350/355 HI FWD)
2	1	D6015-125	CROSSTUBE (OR D6017-115)
3	2	D3502-1	SUPPORT
4	2	D2856-400-710	ABRASION STRIP
5	1	AELS-1032-225	INSERT
6	1	NAS1149D0363J	WASHER (OR AN960JD10)
7	2	MS21920-20	CLAMP (PER DART SPEC. M-MS21920-20)
8	1	MS27039-1-10	SCREW

# **GENERAL NOTES:**

- 1) MATERIAL: MANUFACTURED FROM D6015-125 OR D6017-115  
FINISHED LENGTH = 110.270±0.06
- 2) FINISH: MAGNETIC PARTICLE INSPECT PER DART QSI 038 4.2  
CADMIUM PLATE PER AMS-QQ-P-416B, CLASS 1, TYPE II  
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2  
PAINT OUTSIDE PER DART QSI 005 4.2
- 3) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED.
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED.
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX.
- 6) IDENTIFICATION: DART PART NUMBER "D350-748-141" AND BATCH NUMBER ON INSIDE OF CUFF  
PER DART QSI 044 6.4 (VIBRATING STYLUS)
- 7) WEIGHT: 30.45 lbs
- 8) PART IS SYMMETRIC ABOUT CENTERLINE, EXCEPT FOR Ø.297 HOLE.
- 9) BLEND OUT ALL EDGES FROM MACHINING LONGITUDINALLY, TRANSITION SHOULD BE SMOOTH.  
NOTE: ALL HOLES ARE DRILLED AFTER BENDING.
- 10) BEND PROGRESSIVELY WITH A MINIMUM OF 7 PASSES. MAXIMUM TUBE FLATTENING DUE TO BENDING IS 6% BASED ON O.D.
- 11) HEAT TREAT TO MIN. 180 KSI PER MIL-T-6736 OR AMS 2759-1C AFTER TURNING. ACCEPTABLE TO VERIFY TENSILE STRENGTH BY HARDNESS TEST PER ASTM E18 TO 40-45 HRC.
- 12) INSTALL D2856-400-710 ABRASION STRIPS WITH A GAP ON BOTTOM SIDE OF CROSSTUBE, CENTERED OPPOSITE D3502-1 SUPPORT, PER QSI 035.
- 13) EXTREME CARE MUST BE TAKEN TO PROTECT THE OUTSIDE SURFACE OF THE TUBE. THE OUTSIDE SURFACE MUST BE SMOOTH AND FREE FROM SURFACE DEFECTS SUCH AS SCRATCHES, NICKS, OR DENTS. DEFECTS UP TO 0.005" MAY BE BLENDED OUT LONGITUDINALLY. CIRCUMFERENTIAL GRIND MARKS ARE UNACCEPTABLE. WHEN DRILLING HOLES EXTREME CARE MUST BE TAKEN AND CAREFUL DEBURRING PERFORMED TO ENSURE A CLEAN HOLE WITH NO CRACKING/CHIPPING/GROOVES.
- 14) TORQUE CLAMPS 60 TO 80 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.
- 15) MAX TWIST AFTER BENDING: WITH XTUBE LAYED FLAT ON SURFACE, THE DIFFERENCE BETWEEN CUFF HEIGHTS FROM THE SURFACE MAY BE NO LARGER THAN 0.25 (ZN C1-3).

SHOP COPY  
RETURN TO  
ENGINEERING  
UNCONTROLLED COPY  
SUBJECT TO AMENDMENT  
WITHOUT NOTICE  
WORK ORDER  
NO. **87339** M25  
12/07/16

UNDER REVIEW

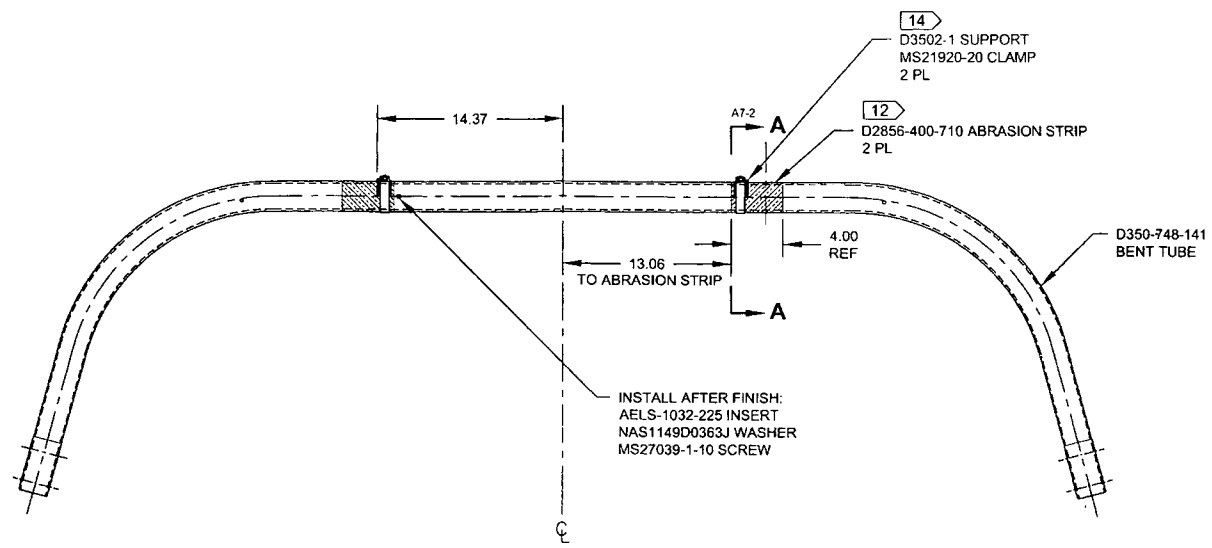
11.07.12

RELEASED  
2011-01-18

F	ADD HRC TEST OPTION (B8-1) PER PAR 09-040, ADD TWIST LIMIT (A8-1, C1-3), ADD D6015-125 OPTION (C8-1), STOCK DIM NOW MACHINED (D1-4)	CP	10.11.23
E	REVISE GENERAL NOTES; UPDATE TO CURRENT ADD STANDARDS; RELOCATED FLAG #6 PER PAR 08-046 (ZN A6-3); TOLERANCES (ZN C6-3, D1-3)	RF	09.09.30
D	MAG. PARTICLE AND CAD PLATE AS MFD.	CP	06.10.31
C	ADD CAD PLATING	CP	06.08.14
B	ADD D6017-115 & PRIME AND PAINT	CP	06.06.30
A	NEW ISSUE	CP	06.03.31
REV.	DESCRIPTION	BY	DATE
DESIGN			
DRAWN			
CHECKED			
MFG. APPR.			
APPROVED			
DE APPR.			
DATE	10.11.23		

<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWING NO D350-748-141	REV. F SHEET 1 OF 4
TITLE CROSSTUBE (AS 350/355 HI FWD)	SCALE NTS
COPYRIGHT © 2006 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD	

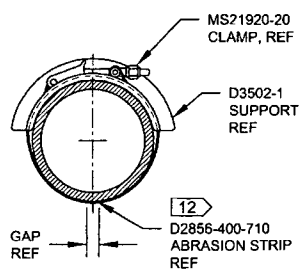
87339



**D350-748-141  
ASSEMBLY DETAIL**

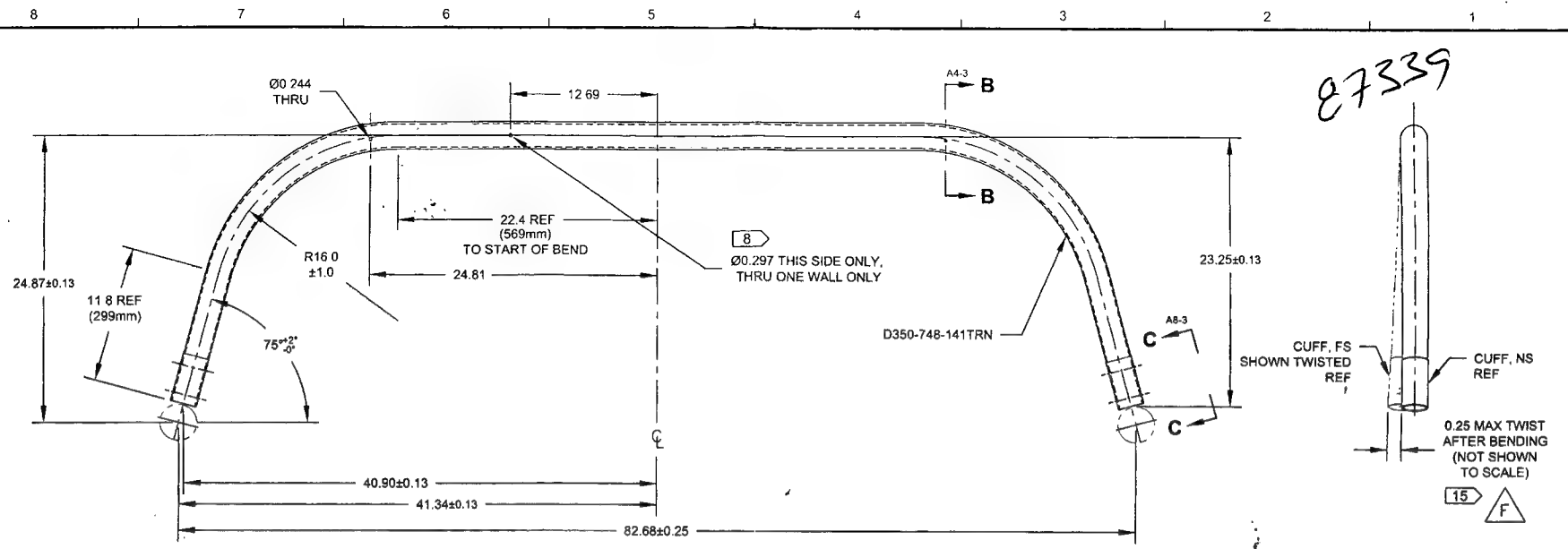
UNDER REVIEW  
11.07.11

RELEASED  
2011-01-28

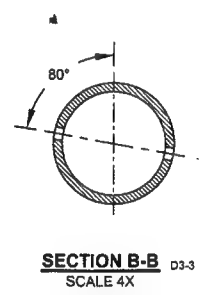
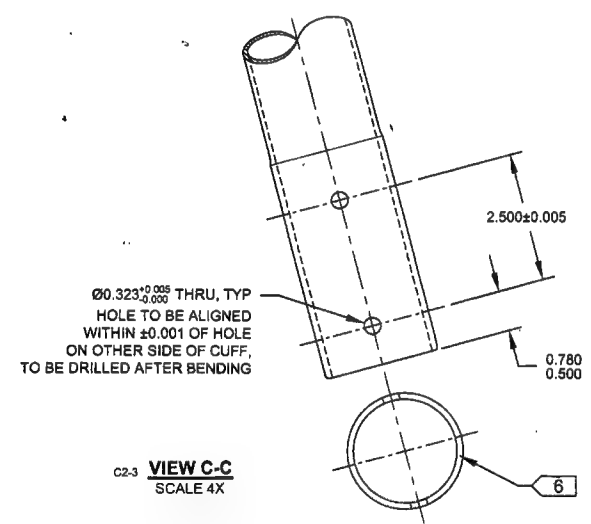


**SECTION A-A** D4 2  
SCALE 4X

DESIGN		<b>DART AEROSPACE LTD</b>	
DRAWN		HAWKESBURY, ONTARIO, CANADA	
CHECKED		DRAWING NO.	REV. F
MFG. APPR.		D350-748-141	SHEET 2 OF 4
APPROVED		TITLE	SCALE
DE APPR.		CROSSTUBE (AS 350/355 HI FWD)	NTS
DATE	10.11.23	<small>COPYRIGHT © 2006 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD</small>	



**D350-748-141**  
**BENDING AND DRILLING DETAIL** 10



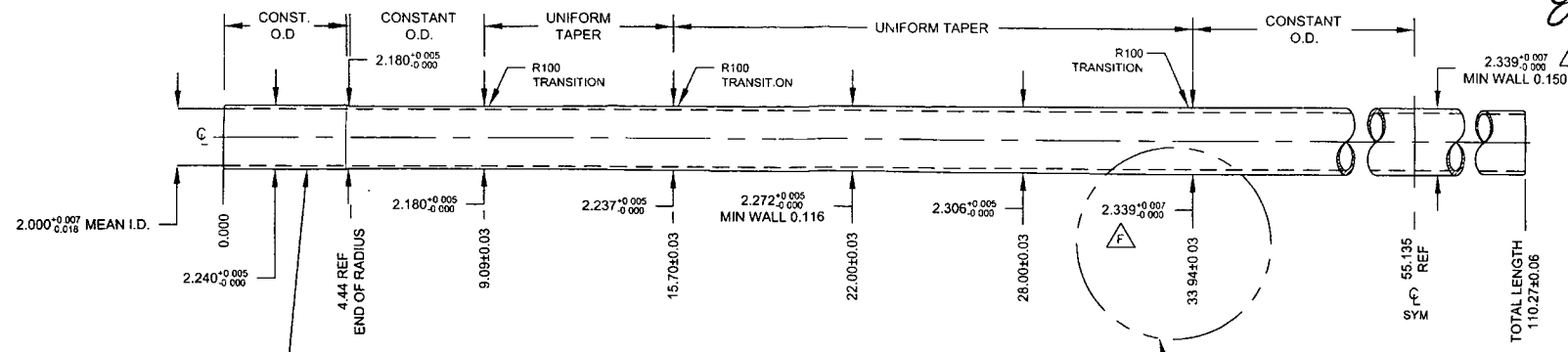
UNDER REVIEW  
 11.07.12

RELEASED  
 2011-01-18

DESIGN		<b>DART AEROSPACE LTD</b>	
DRAWN		HAWKESBURY, ONTARIO, CANADA	
CHECKED		DRAWING NO.	REV. F
MFG. APPR.		D350-748-141	SHEET 3 OF 4
APPROVED		TITLE	SCALE
DE APPR.		CROSSTUBE (AS 350/355 HI FWD)	NTS
DATE	10.11.23	COPYRIGHT © 2025 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD	



87335

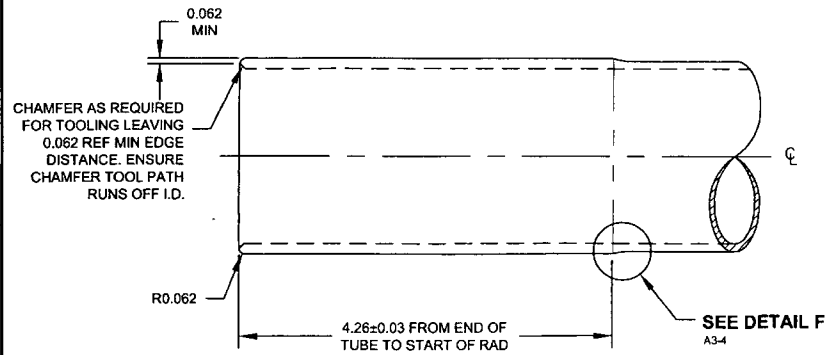


SEE DETAIL D  
A6-4

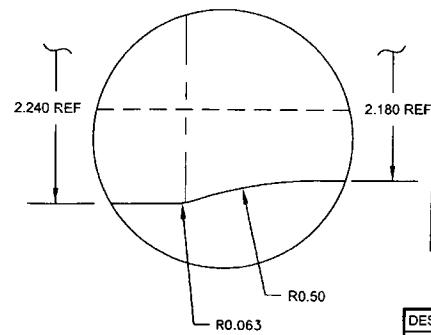
SEE DETAIL E  
A1-4

UNDER REVIEW  
11.07.12

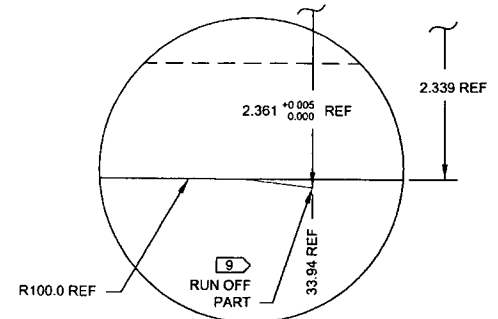
**D350-748-141TRN  
TURNING DETAIL**



**DETAIL D:  
CROSSTUBE CUFF** C7-4  
SCALE 3X



**DETAIL F:  
CUFF TRANSITION** A5-4  
NOT TO SCALE



**DETAIL E:  
TAPER RUN-OFF** C3-4  
NOT TO SCALE

RELEASED  
2011-01-13

DESIGN	99	<b>DART AEROSPACE LTD</b>	
DRAWN	99	HAWKESBURY, ONTARIO, CANADA	
CHECKED	13	DRAWING NO.	REV. F
MFG. APPR.	13	D350-748-141	SHEET 4 OF 4
APPROVED	13	TITLE	SCALE
DE APPR.	13	CROSSTUBE (AS 350/355 HI FWD)	NTS
DATE	10.11.23	<small>COPYRIGHT © 2006 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD</small>	



# METCOR INC.

560 BOUL. ARTHUR-SAUVÉ  
ST-EUSTACHE, QC, J7R 5A8  
Tel: 450-473-1884 / Fax: 450-491-5498

## Certificat de Conformité

Certificate of Compliance

BON DE TRAVAIL order	CHARGEMENT load
179761	1

CLIENT / customer 215

DART AEROSPACE  
1270 ABERDEEN  
HAWKESBURY

ON K6A 1K7

LIVRÉ À / shipped to:

DART AEROSPACE  
1270 ABERDEEN  
HAWKESBURY

ON K6A 1K7

1

COMMANDE DU CLIENT customer po	BON DE LIVRAISON DU CLIENT customer shipper no.	MATÉRIEL material	CODE DE TRAITEMENT mat'l heat code	NUMÉRO DE LOT lot number
PO18026		Steel		

### SPÉCIFICATIONS DU PROCÉDÉ processing specifications

STRESS REL

SAE AMS 2759/1 REV.E

EXIGENCE / requirement	SPÉCIFICATIONS / specified	TESTS EXÉCUTÉS / performed	RÉSULTATS DE TESTS / results
Visual			

QUANTITÉ quantity	POIDS weight	DESCRIPTION DES PIÈCES parts description
5	150	D350-748-101 (1) CROSSTUBE REFERENCE 87331  (1) D350-748-101 CROSSTUBE REFERENCE: 87335  (1) D350-748-101 CROSSTUBE REF: 87339  (1) D350-748-201 CROSSTUBE REFERENCE: 87220  (1) D350-748-201 CROSSTUBE REFERENCE: 81522  CONTENANT: 1 NIL

### COMMENTAIRES / comments

ALL THE HEAT TREATMENT PROCESSING PERFORMED ON THIS ORDER WAS ACCOMPLISHED USING HEAT TREATMENT EQUIPEMENT THAT MEETS THE REQUIREMENTS OF AMS 2759. ALL THE HEAT TREATMENT OPERATIONS WERE ACCOMPLISHED IN ACCORDANCE WITH THE REQUESTED/REQUIRED HEAT TREATMENT SPECIFICATION AND ALL REQUIRED VERIFICATIONS TEST HAVE BEEN PERFORMED AND DOCUMENTED. NO



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UNAUTHORIZED CHANGES OR DEVIATIONS TO REQUIRED HEAT TREATMENT SPECIFICATIONS OR  
PROCEDURES HAVE BEEN PERFORMED.

CERTIFIÉ par / Certified by:

*Isabel Ghar*

DATE: 2012-10-03



**CERTIFICATE OF  
CONFORMANCE**

**CADORATH PLATING CO. LTD.  
2150 LOGAN AVENUE  
WINNIPEG, MANITOBA R2J-0J1**

**DATE:** Oct-23-2012

**CONSIGNED TO:** Dart Aerospace Ltd.  
1270 Aberdeen St.  
Hawksbury, ON K6A 1K7

**W/O #:** 118419  
**INVOICE #:** 62946

**CONTRACT OR  
PURCHASE ORDER # PO18101**

**DESCRIPTION:** CROSSTUBE

**QTY** 1

**P/N #** d350-748-101

**S/N #** 87339

CADMIUM PLATE IAW AMS-QQ-P-416C TYPE 2 YELLOW CLASS 1.  
MPI IAW ASTM-E-1444. BAKE HEAT CHART # 12-1082, 12-1097.

**CERTIFICATE:** I certify that the items indicated here on have  
been inspected and tested and conform to all specifications  
and requirements detailed on the contract or purchase order.

**Approved Inspector:** \_\_\_\_\_







# LIQUID PENETRANT TEST REPORT

P-12680

CLIENT DART AEROSPACE DATE Nov. 1, 2012 PAGE 1 OF 1  
ATTENTION ANDY - CHANTAL ACUREN JOB NO. 188-12-C0391 TIME AM ☒ PM ☐  
ADDRESS 1270 ABERDEEN ST. PO/VO No. ---  
NAUKES BURY, ON WORK LOCATION SAME  
ACCEPTANCE STD. ASMA 1417/Q31-038 REV./DATE 2005  
PROJECT F.P.I. on CROSS TUBES  
ITEM(S) EXAMINED (7)

JOB DESCRIPTION --- PROCEDURE No. LT-2002 REV./DATE 2008 TECHNIQUE No. LT-2002 REV./DATE 2008  
PART No. SEE RESULTS MATERIAL ALUMINUM / STEEL THICKNESS VARIABLES  
SCOPE A DYE FLUORESCENT DYE INSPECTION WAS COMPLETED ON THE 100% EXTERNAL SURFACE

TEST DETAILS  
METHOD ☒ FLUORESCENT ☐ VISIBLE ☒ WATER WASH ☐ SOLVENT REMOVABLE ☐ POST EMULSIFIED  
FAMILY BRAND MAGNAFLUX BLACK LIGHT S/N 16459 ☐ OUTPUT > 1000  $\mu$ W/cm<sup>2</sup> ☐ AMBIENT < 2 fc  
PENETRANT 2L67 MINIMUM DWELL TIME 45 MIN. LIGHTING EQUIP. ☐ FLASHLIGHT ☐ TROUBLELIGHT ☐ OUTPUT > 100 fc @ SURFACE  
PENETRANT REMOVER 100 MINIMUM DRY TIME >10 MIN. OTHER LAB. NO.  
DEVELOPER SKD 52 MINIMUM DWELL TIME 10 MIN. LIGHT METER S/N 1088866 CAL DUE DATE Nov 12 2012  
DEVELOPER TYPE ☒ NON AQUEOUS ☐ AQUEOUS ☐ DRY

TEST SURFACE  
SURFACE CONDITION ☐ AS GROUND ☐ AS WELDED ☒ MACHINED ☐ SHOT BLASTED ☒ CLEAN BARE METAL  
SURFACE TEMPERATURE ☐ < -4°C/ 20°F ☐ -4°C/ 20°F TO 10°C/ 50°F ☒ 10°C/ 50°F TO 52°C/ 125°F ☐ > 52°C/ 125°F

RESULTS- ( <input type="checkbox"/> METRIC <input type="checkbox"/> IMPERIAL )			
ITEM	COMMENTS	ACCEPT	REJECT
	<u>CROSS TUBE NO. #</u>		
	<u>ALUMINUM</u>		
<u>1</u>	<u>88091</u>	<input checked="" type="checkbox"/>	
<u>1</u>	<u>84487</u>	<input checked="" type="checkbox"/>	
<u>1</u>	<u>84782</u>	<input checked="" type="checkbox"/>	
<u>1</u>	<u>84488</u>	<input checked="" type="checkbox"/>	
	<u>(STEEL) CROSS TUBES</u>		
<u>1</u>	<u>87339</u>	<input checked="" type="checkbox"/>	
<u>1</u>	<u>87335</u>	<input checked="" type="checkbox"/>	
<u>1</u>	<u>87338</u>	<input checked="" type="checkbox"/>	

Scope of Services  
The agreement of Acuren Group Inc. to perform services extends only to those services provided for in writing. Under no circumstances shall such services extend beyond the performance of the requested services. It is expressly understood that all descriptions, comments and expressions of opinion reflect the opinions or observations of Acuren Group Inc. based on information and assumptions supplied by the owner/operator and are not intended nor can they be construed as representations or warranties. Acuren Group Inc. is not assuming any responsibilities of the owner/operator and the owner/operator retains complete responsibility for the engineering, manufacture, repair and use decisions as a result of data or other information provided by Acuren Group Inc. In no event shall Acuren Group Inc.'s liability in respect of the services referred to herein exceed the amount paid for such services.  
Standard of Care  
In performing the services provided, Acuren Group Inc. uses the degree, care and skill ordinarily exercised under similar circumstances by others performing such services in the same or similar locality. No other warranty, expressed or implied, is made or intended by Acuren Group Inc.

SIGNATURES  
CLIENT REPRESENTATIVE Andy Chantal PRINT SIGNATURE  
TECHNICIAN (SIGNATURE): Mike Johnson PRINT SIGNATURE  
NAME (PRINT): Mike Johnson 1<sup>ST</sup> TECHNICIAN 2<sup>ND</sup> TECHNICIAN  
CGSB LEVEL # SNT LEVEL --- CGSB LEVEL --- SNT LEVEL ---  
CGSB REG. No. 6606 CGSB REG. No. ---  
DTR # E-120254  
REPORT REVIEWED BY: --- NAME INITIALS

